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DECLARA	TION FOR	First Named Inventor	nk										
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My residence, post office address, and clizizenship are as stated below next to my name. Delevel a Im the original, first and sole inventor (if ny one name is lated below) or an original, first and joint inventor (if plural names are listed below) or the subject matter which is claimed and for which a patient is sought on the invention entitled: INDOLE/INDOLINE BASED HYBRID DYES AND INDOLE/INDOLINE BASED HYBRID DYE INTERMEDIATE PRODUCTS Intermediation of which (Title of the Invention)													
	nformation which is material to patent												
certificate, or >365(a) of any PCT Int and have also identified below, by cl having a filing date before that of the	ts under Title 35, United States Code ternational application which designat hecking the box, any foreign applicati e application on which priority is claim	ted at least one country other the on for patent or inventor's certifi led.	an the United States of A cate, or of any PCT Interr	merica, listed below national application									
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Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patient and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patients, Washington, DC 20231.

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DECLARATION	Page 2

I hereby claim the benefit under Title 35, United States Code >120 of any United States application(s), or >365@ of any PCT international application
designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior
United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code >112.1 acknowledge the duty to
disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations >1.56 which became available between the filing
date of the price application and the policinal or PCT international filing date of this application

I hereby dain the benefit under Title 35, United States Code 3120 of any United States application(s), or 35550 of any PCT international application in designating the United States application in the manner provided by the first paragraph of Title States Code 312.1 acknowledge in the prior united States or PCT international application in the manner provided by the first paragraph of Title States Code 312.1 acknowledge the duty to disclose information which is material to patiently the patient of the prior application and the national or PCT international filing date of the application. U.S. Parent Parent Patent Number														
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As a named inventor, I hereby appoint trademark Office connected therewith:	he following	attorney(s) a	ind/or a	gent(s) to	o proseci	ute this	application	on and	to trans	sact a	all business	in the Pate	nt and	
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X List Attorney(s) and/or agent(s) name and registration number below:														
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I hereby declare that all state information and belief are beli willful false statements and the Title 18 of the United States Cor any patent issued thereon.	eved to be e like so m	true; an	d furti punisi	ier that hable b	t these	state or imp	ments : orisonm	were	made or bot	wit h, u	h the kno nder Sec	wledge to	hat f of	
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City 40219 Duesseldorf	State		Zip		Co	untry	Germ	any			Applicant Authority	<u> </u>		
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Name f	Additi r				ADDITIONAL INVENTOR(S) Supplem ntal Sheet										
Given Name		al Joint In	ventor	, if any	:				A p	etition ha	s been file	ed for thi	s uns	igned	
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Given Name	David			Middle Initial	1		Family Rose					Suffix e.g. Jr.			
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i hereby claim foreign priority benefit certificate, or s365(a) of any PCT Inthe and have also identified below, by ch having a filing date before that of the														
Prior Foreign Application Number(s)	Country		reign Filing Date MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO									
Number(s) (v(MVDDYTYT) Not Claimed YES NO 101 00 938.0 Germany 01/10/2001														
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<u> </u>	Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto. As a named Inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:													
As a named inv Trademark Offi	entor, I hereby appoint to be connected therewith:	he following	attorney(s) a	nd/or age	nt(s) to prosec	this applicati	on and to t	ransa	act all business	in the Pate	nt and			
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Name	Gregory M. Hill							_						
Address	Henkel Corpora	ation						_						
Address	2500 Renaissa	nce Blvd,	Suite 200					_						
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e.g. Jr. Inventor's Signature Date Residence: City Duesseldorf State Country Germany Citizenship Germany Post Office Address Wupperstrasse 3 Post Office Address 40219 Duesseldorf State Zip Country Germany

X Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION											ADDITIONAL INVENTOR(S) Supplemental Sheet							
Nam	e of	Addi	ition	al Joint In	ventor	, if any	:					A p	etition ha ntor	s been file	ed for thi	s un:	signed	
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